APPENDIX I

Date Received	Initials	Mission	Symbol	Mission #	
	UH- 60 HELICO	PTER SUPPORT R	EQUEST		
Supported Organiza	tion:	POI Problem #:			
Date of Mission: Today's Date		: # of Helicopters:			
Type Mission 🗖 Pax	Xsprt Sling Load Recon	Paradrop	SPIES	FRIES Other	
	Name and /	or Grid Coordinate		Departure Time	
Pickup location					
Destination (s)					
Estimated Flight T	ime Per Helicopter :	Total Numbe	er of Passengers :		
Special Equipmen	t Required :				
Radio Call Sign :	Frequency	: (Pri)		(Alt)	
POC:	Phone	: (Pri)		(Alt)	
	REMARKS (Detailed description	n of mission and any	y additional inform	nation)	
a manifest will be by the supported the passengers have met the pro and are authoriz	r tactical training missions be prepared and retained d unit. For other missions, listed on the reverse side rovisions of AR 95-1 zed to fly in Army aircraft. POI missions I verify	Trail Approved Disapproved	POI MISSIONS raining Branch, OT		
that the requeste	ed DZs or LZs have		NON-POI MISS	SIONS	
been approved f Operations & Tra	for use by the raining Division, DOT.	Director, DOT or Chief of Staff, USAIC			
-	(signature of requester)	Approved Disapproved		(initials & date)	

FB Form 15-R-E, MAY 98 (PREVIOUS EDITION IS OBSOLETE)

Privacy Act Statement

AUTHORITY: 10 USC 3012, PL 93-579 and EO 9397

PRINCIPLE PURPOSE: To aid in identification of personnel.

ROUTINE USE: SSN will be used for identifications purposes only.

DISCLOSURE: Voluntary; however failure to provide the SSN may

result in denial to fly on Army aircraft.

NAME BANK CON ORGANIZATION					
NAME	RANK	SSN	ORGANIZATION		

FB Form 15-R-E, MAY 98 (REVERSE)